

Work Order ID 94477

\*94477\*

Page 1

December-19-12 11:18:17 AM

Item ID: D3023-1 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Back Panel  
 Start Date: 12/19/12 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 1/18/13 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: MCS Date: 12-12-19 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_  
 Run Start \*NR1\*  
 Stop \*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description                | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| <b>Draw Nbr</b>                | <b>Revision Nbr</b>                     |                      |         |        |              |               |               |                  |                |
| D3023                          | Rev A                                   |                      |         |        |              |               |               |                  |                |
| 100                            | FLOW WATER JET                          | 0.00                 |         |        |              |               |               |                  |                |
| *100*                          |   |                      |         |        |              |               |               |                  |                |
| Waterjet                       | Memo                                    | 0.00                 |         |        |              |               |               |                  |                |
| FLOW CNC Waterjet              | 1-Cut as per Dwg D3023                  |                      |         |        |              |               |               |                  |                |
| 2024, 032                      | Dwg Rev: <u>A</u>                       |                      |         |        |              |               |               |                  |                |
|                                | Prog Rev: <u>A</u>                      |                      |         |        |              |               |               |                  |                |
|                                | ***graind direction along 28.100" ***   |                      |         |        |              |               |               |                  |                |
|                                | 2-Deburr if necessary                   |                      |         |        |              |               |               |                  |                |
| 110                            | QC2- Inspect parts off machine FAI/FAIB | 0.00                 |         |        |              |               |               |                  |                |
| *110*                          |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo                                    | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                |   |                      |         |        |              |               |               |                  |                |

1 0 JM 13-2-4

1 0 JM 13-2-4

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling <input type="checkbox"/>                       |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process <input type="checkbox"/>                             |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved <input type="checkbox"/>                          |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |   |   |  |   |
|---|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |

Work Order ID 94477

\*94477\*

Page 2

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Item ID: D3023-1

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Back Panel

Start Date: 12/19/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 1/18/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

| Sequence ID/<br>Work Center ID        | Operation<br>Description                                  | Set Up/<br>Run Hours          | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|---------------------------------------|---|-------------------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 120<br>*120*<br>QC<br>Quality Control | QC8- Inspect parts - second check<br><br>Memo             | 0.00<br>DWS<br>15<br>13.2-4   |         |        |              | 1             |               |                  |                |
| 130<br>*130*<br>Brake NC<br>Brake NC  | Form as per dwg<br><br>Memo                               | 0.00<br>0.00                  |         |        |              | 1             |               |                  | SJ<br>13/02/05 |
| 140<br>*140*<br>QC<br>Quality Control | QC5- Inspect part completeness to step on W/O<br><br>Memo | 0.00<br>0.00<br>SMP<br>13.2.5 |         |        |              | 1             |               |                  |                |

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling <input type="checkbox"/>                       |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process <input type="checkbox"/>                             |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved <input type="checkbox"/>                          |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |  |  |   |  |  |   |  |  |  |  |   |  |
|---|--|--|---|--|--|---|--|--|--|--|---|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |  |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |  |  | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |  |  | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |

# Work Order ID 94477

\*94477\*

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Item ID: D3023-1

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Back Panel

Start Date: 12/19/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 1/18/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description                             | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 180                            | Identify as per dwg & Stock Location: <u>w/r 001</u> | 0.00                 |         |        |              |               |               |                  |                |
| *180*                          |  |                      |         |        |              |               |               |                  |                |
| Packaging                      | Memo   | 0.00                 |         |        |              |               |               |                  |                |
| Packaging                      |  |                      |         |        |              |               |               |                  |                |
| 190                            | QC21- Final Inspection - Work Order Release          | 0.00                 |         |        |              |               |               |                  |                |
| *190*                          |  |                      |         |        |              |               |               |                  |                |
| QC                             | Memo   | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                |  |                      |         |        |              |               |               |                  |                |

13-2-5

13/2/6

13-02-5

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved   |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |   |   |   |  |
|---|---|---|---|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br>_____<br>_____<br>_____ | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other<br>_____<br>_____<br>_____ |

# Picklist Print

December-19-12 11:18:17 AM

Page 1

Work Order ID: 94477

Parent Item: D3023-1

Parent Item Name: Back Panel

Start Date: 12/19/12

Required Date: 1/18/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP C02.01.23Revised NG  
IPP Rev:D 08-04-16 now water jet DD verified by:EC

| Component Item ID/<br>Item Name    | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty                | Qty<br>Issued | Date<br>Issued | Status   |
|------------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|-----------------------------|---------------|----------------|----------|
| M2024T3S.032<br>2024-T3 .032 sheet |                        | Purchased     | No          |                     |                  | 100             | sf                 | 370.1522       | 2.8777      | <del>3.0291579</del><br>3.1 |               |                | Jm.3-2-4 |
|                                    |                        |               |             |                     |                  | <u>Location</u> |                    | <u>Loc Qty</u> |             | <u>Loc Code</u>             |               |                |          |
|                                    |                        |               |             |                     |                  | MAT022          |                    | 370.1522       |             |                             |               |                |          |
|                                    |                        |               |             |                     |                  | 118243          |                    | 32.4962        |             |                             |               |                |          |
|                                    |                        |               |             |                     |                  | 118523          |                    | 141            |             |                             |               |                |          |
|                                    |                        |               |             |                     |                  | 121309          |                    | 68.656         |             |                             |               |                |          |
|                                    |                        |               |             |                     |                  | 123096          |                    | 27.6           |             |                             |               |                |          |
|                                    |                        |               |             |                     |                  | 123574          |                    | 100.4          |             | 123574.                     |               |                |          |

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling <input type="checkbox"/>                       |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process <input type="checkbox"/>                             |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved <input type="checkbox"/>                          |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |  |  |   |  |  |   |  |  |  |  |   |  |
|---|--|--|---|--|--|---|--|--|--|--|---|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |  |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |  |  | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |  |  | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |

|                              |  |              |         |
|------------------------------|--|--------------|---------|
| DART AEROSPACE LTD           |  | Work Order:  | 94477   |
| Description: Back Panel      |  | Part Number: | D3023-1 |
| Inspection Dwg: D3023 Rev: A |  | Page 1 of 1  |         |

### FIRST ARTICLE INSPECTION CHECKLIST

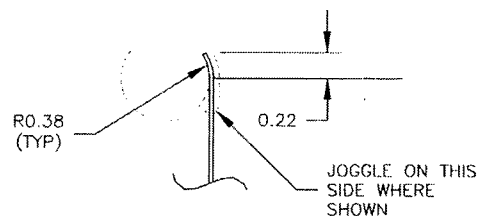
☒ First Article ☐ Prototype

| Drawing Dimension | Tolerance     | Actual Dimension | Accept | Reject | Method of Inspection | Comments   |
|-------------------|---------------|------------------|--------|--------|----------------------|------------|
| Ø0.128            | +0.005/-0.001 | 0.132"           | -      |        | U                    | Jkmo1      |
| Ø0.191            | +0.005/-0.001 | 0.193"           | -      |        | U                    |            |
| 1.660             | +/-0.010      | 1.662"           | -      |        | U                    |            |
| 0.375             | +/-0.010      | 0.378"           | -      |        | U                    |            |
| 1.340             | +/-0.010      | 1.343"           | -      |        | U                    |            |
| 2.375             | +/-0.010      | 2.375"           | -      |        | U                    |            |
| 0.375             | +/-0.010      | 0.376"           | -      |        | U                    |            |
| 25.28             | +/-0.030      | 25.28"           | -      |        | T                    | Jkmo2      |
| 27.03             | +/-0.030      | 27.03"           | -      |        | T                    |            |
| 28.10             | +/-0.030      | 28.10"           | -      |        | T                    |            |
| 1.30              | +/-0.030      | 1.309"           | -      |        | U                    |            |
| 2.375             | +/-0.010      | 2.379"           | -      |        | U                    |            |
| 8.711             | +/-0.010      | 8.715"           | -      |        | U                    | Production |
| 5.597             | +/-0.010      | 5.599"           | -      |        | U                    |            |
| 8.57              | +/-0.030      | 8.576"           | -      |        | U                    |            |
| 1.970             | +/-0.010      | 1.972"           | -      |        | U                    |            |
| 7.42              | +/-0.030      | 7.431"           | -      |        | U                    |            |
| 10.92             | +/-0.030      | 10.921"          | -      |        | U                    |            |
| 14.75             | +/-0.030      | 14.75"           | -      |        | T                    |            |
|                   |               |                  |        |        |                      |            |
|                   |               |                  |        |        |                      |            |
|                   |               |                  |        |        |                      |            |

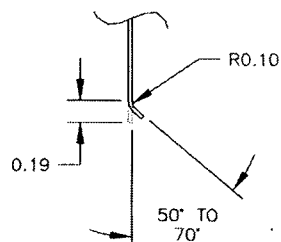
|                 |                 |                     |     |
|-----------------|-----------------|---------------------|-----|
| Measured by: Jm | Audited by: DAS | Prototype Approval: | N/A |
| Date: 13-2-4    | Date: 13-2-4    | Date:               | N/A |

| Rev | Date     | Change    | Revised by | Approved |
|-----|----------|-----------|------------|----------|
| A   | 08.11.27 | New Issue | KJ/EC      |          |

SECTION A-A  
SCALE 1:1  
(TYPICAL, EXCEPT WHERE SHOWN)

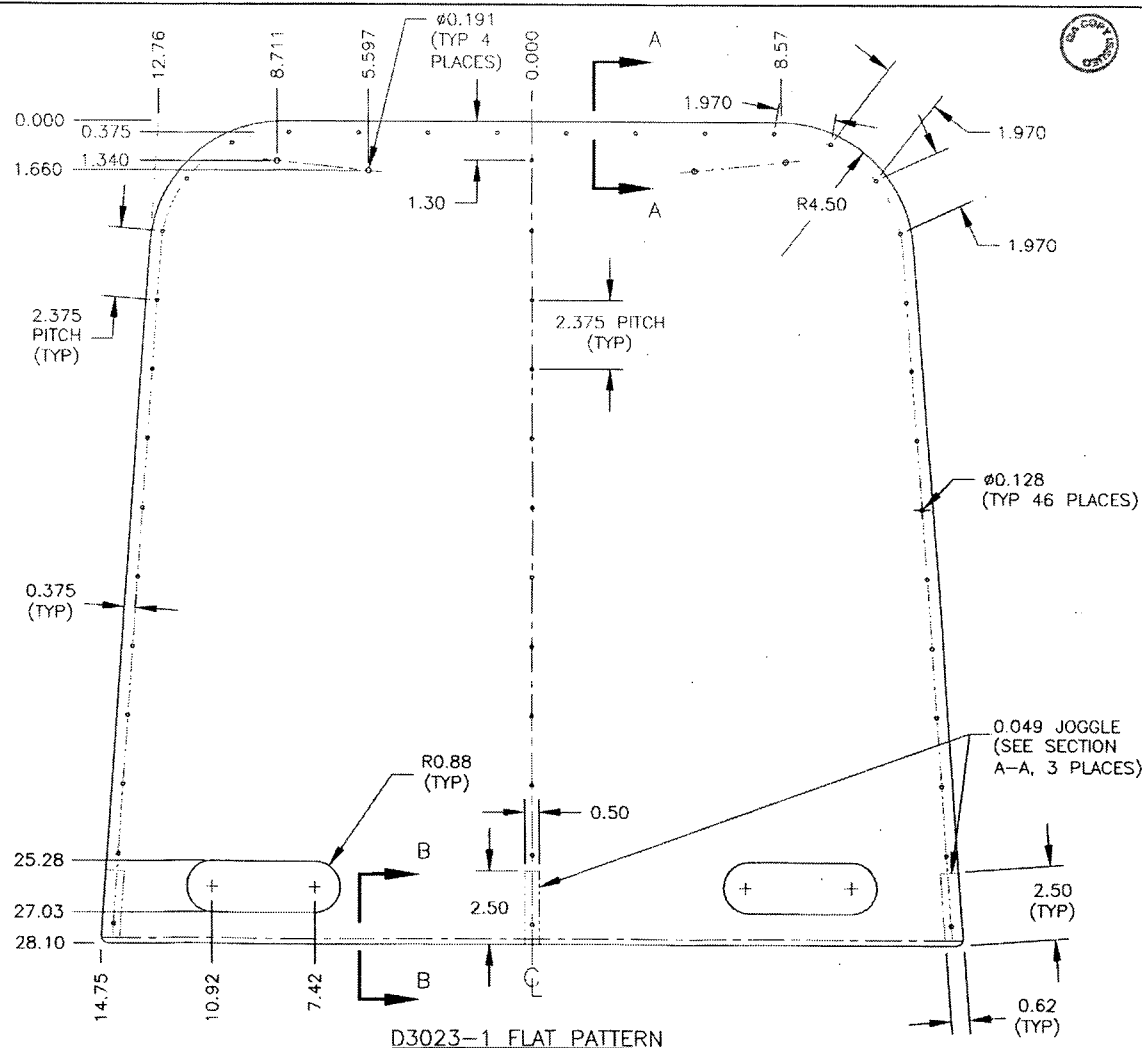


SECTION B-B  
SCALE 1:1  
(BOTTOM EDGE ONLY)



RELEASED  
01.06.07

D3023-1 BEND DETAIL



D3023-1 FLAT PATTERN

D3023-1 BACK PANEL:

- 1) MATERIAL: 2024-T3 (QQ-A-250/4) 0.032 THICK
- 2) FINISH: ACID ETCH & ALODINE PER DART QSI 005 4.1  
POWDER COAT GREY SANTEDX (REF 4.3.5.6) PER DART QSI 005 4.3
- 3) ALL DIMENSIONS ARE IN INCHES.
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.

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|         |          |             |
|---------|----------|-------------|
| A       | 01.05.18 | NEW ISSUE   |
| DESIGN  | CP       | DRAWN BY CP |
| CHECKED | CP       | APPROVED    |
| DATE    | 01.05.18 | TITLE       |
|         |          | BACK PANEL  |
|         |          | SCALE 1:4   |

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